

| POSITION                  | INITIALS | ID N. | DATE     |
|---------------------------|----------|-------|----------|
| FEES DETERMINATION        | 87       |       | 07-12-01 |
| O.I.P.E. CLASSIFIER       |          |       | 7-23-01  |
| FORMALITY REVIEW          | 7/23/01  | 1115  | 08-23-01 |
| RESPONSE FORMALITY REVIEW |          |       |          |

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral) ... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1     | ✓     | ✓        | ✓    |
| 2     | ✓     | ✓        | ✓    |
| 3     | ✓     | ✓        | ✓    |
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| 5     | ✓     | ✓        | ✓    |
| 6     | ✓     | ✓        | ✓    |
| 7     | ✓     | ✓        | ✓    |
| 8     | ✓     | ✓        | ✓    |
| 9     | ✓     | ✓        | ✓    |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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